



# APPLICATION FOR RENEWAL OF TRAFFIC VIOLATOR SCHOOL OPERATOR LICENSE

FEE—\$\_\_\_\_\_ (Non Refundable)

## FOR DEPARTMENTAL USE

TEMP. PERMIT ISSUE DATE

AMOUNT

OFFICE

OFFICE NO.

DATE

CASHIER NO.

## WRITTEN TEST RESULTS

DATE

SCORE

1.

2.

3.

H6 DL PRINTOUT

OPERATOR LICENSE NUMBER

EXPIRATION DATE

TV0

SCHOOL NAME (DBA)

TVS LICENSE NUMBER

NAME OF APPLICANT (FIRST, MIDDLE, LAST)

DAYTIME PHONE NUMBER

RESIDENCE ADDRESS (STREET)

CITY

ZIP

DRIVER LICENSE NUMBER AND EXPIRATION DATE

SOCIAL SECURITY NUMBER

**Including** traffic offenses, have you been **CONVICTED, FINED** or **PLACED ON PROBATION** for any crime or offense

**either** Felony or Misdemeanor since issuance of last license?..... ☐ Yes ☐ No

**NOTICE:** Describe "yes" answer to the above question by listing each separate offense by date of conviction. Describe the offense, court and disposition in the appropriate columns. If you were pardoned or if the offense was expunged from the record of the court under **Penal Code Section 1203.4, so state**. If you are currently on probation or parole, show the name and address of your probation or parole officer.

Listing all convictions, fines, or probations may not necessarily preclude you from receiving a license.

### IMPORTANT NOTE

**HOWEVER, a background investigation will be made, and failure to disclose ALL convictions, fines, or probations including those out of state will result in the cancellation of the temporary permit and may result in a refusal of the appropriate license.**

### IMPORTANT NOTE

CONVICTION DATE	CONVICTED OF	COURT OF JURISDICTION (FULL NAME AND ADDRESS)	DISPOSITION OF OFFENSE (DESCRIBE SENTENCE)			
			Amount Fined	Term of Probation	Jail or Prison Term	Date Released

"Your social security number will be collected pursuant to California Business and Professions Code §30. It is used in the administration of occupational licensing laws to determine eligibility for issuance or renewal of an occupational license subject to the applicable provisions of the California Vehicle Code, California Business and Professions Code §§29.5, 30 and 31, as well as California Welfare and Institutions Code §11350.6. It is also used to aid in the collection of monies owed in connection with failure to pay a fine or failure to appear in court by an applicant; and to aid in the collection of monies owed by an applicant in connection with Aid to Families with Dependent Children, Child Support and Establishment of Paternity and Federal Payments for Foster Care and Adoption Assistance Programs, pursuant to 42 U.S.C. §405 and 42 U.S.C. §651 et seq. Your social security number is not provided for public inspection; however, it will be provided in response to requests for information from state and federal agencies operating and involved in the collection of taxes and child support payments pursuant to 42 U.S.C. 601 et seq., and California Business and Professions Code §30.

Collection of your social security number is mandatory. Failure to furnish the information requested will result in denial of processing an application for issuance or renewal of an occupational license or permit, pursuant to Business and Professions Code §30, subdivision (c)."

**I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.**

**I further certify that I am currently employed at the above school.**

SIGNATURE

X

DATE

## EMPLOYING LICENSEE'S CERTIFICATION

**I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.**

**I further certify that I am the authorized representative of the employing licensee named herein. It is my intention to continue to employ the above named applicant when he/she receives a temporary permit or license from the Department of Motor Vehicles.**

OWNER/OPERATOR NAME (PLEASE PRINT)

AUTHORIZED SIGNATURE

X

DATE

